

Application Data Sheet

Application Information

Application Type:: Regular
Subject Matter:: Utility
Suggested Classification::
Suggested Group Art Unit::
CD-ROM or CD-R?:: None
Number of CD disks::
Number of Copies of CDs::
Sequence Submission?:: None
Computer Readable Form (CRF):: No
Number of copies of CRF:: 0
Title:: PTX3 AS AN EARLY PROGNOSTIC
INDICATOR OF CARDIOVASCULAR AND
CEREBROVASCULAR PATHOLOGIES
Attorney Docket Number:: 2503-1036-1
Request for Early
Publication?:: No
Request for Non-Publication?:: No
Suggested Drawing Figure::
Total Drawing Sheets:: 4
Small Entity?:: No
Latin Name::
Variety Denomination Name::
Petition Included?:: No
Petition Type::
Licensed US Gov't Agency::
Contract or Grant Numbers::
Secrecy Order in Parent No
Appl.?::

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: ITALY
Status:: Full Capacity
Given Name:: ROBERTO
Middle Name::
Family Name:: LATINI
City of Residence:: MILANO
State or Province of Residence::
Country of Residence:: ITALY
Street of Mailing Address:: VIA ERITREA, 62

City of Mailing Address:: MILANO
State or Province of Mailing Address::
Country of Mailing Address:: ITALY
Postal or Zip Code of Mailing Address:: 20157

Applicant Authority Type:: Inventor
Primary Citizenship Country:: ITALY
Status:: Full Capacity
Given Name:: GIUSEPPE
Middle Name::
Family Name:: PERI
City of Residence:: MILANO
State or Province of Residence::
Country of Residence:: ITALY
Street of Mailing Address:: VIA ERITREA, 62

City of Mailing Address:: MILANO
State or Province of Mailing Address::
Country of Mailing Address:: ITALY
Postal or Zip Code of Mailing Address:: 20157

Applicant Authority Type:: Inventor
Primary Citizenship Country:: ITALY
Status:: Full Capacity
Given Name:: ALBERTO
Middle Name::
Family Name:: MANTOVANI
City of Residence:: MILANO
State or Province of Residence::
Country of Residence:: ITALY
Street of Mailing Address:: VIA MANGIAGALLI, 31

City of Mailing Address:: MILANO
State or Province of Mailing Address::
Country of Mailing Address:: ITALY
Postal or Zip Code of Mailing Address:: 20133

Applicant Authority Type:: Inventor
Primary Citizenship Country:: ITALY
Status:: Full Capacity
Given Name:: ALDO P.
Middle Name::
Family Name:: MAGGIONI
City of Residence:: FIRENZE
State or Province of Residence::
Country of Residence:: ITALY
Street of Mailing Address:: VIA LAMARMORA, 34

City of Mailing Address:: FIRENZE
State or Province of Mailing Address::
Country of Mailing Address:: ITALY
Postal or Zip Code of Mailing Address:: 50121

Correspondence Information

Correspondence Customer Number:: 000466

Representative Information

Representative Customer Number::	000466
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Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	Non-Provisional of	60/422,478	10/31/02

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::

Assignment Information

Assignee Name::

Street of Mailing Address::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::